Please type a plus sign (+) inside this box + U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. 901120.90011 UTILITY Attorney Docket No. PATENT APPLICATION Christopher J. Hanna First Inventor TRANSMITTAL Intelligent Medical Image Management System Express Mail Label No. | EV 161 877 369 (Only for new nonprovisional applications under 37 CFR 1.53(b)) Commissioner for Patents **APPLICATION ELEMENTS** ADDRESS TO: P.O. Box 1450 See MPEP chapter 600 concerning utility patent application contents. Alexandria, VA 22313-1450 Fee Transmittal Form (e.g., PTO/SB/17) CD-ROM or CD-R in duplicate, large table or it an original and a duplicate for fee processing) Computer Program (Appendix) Applicant claims small entity status. See 37 CFR 1.27. 2. 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) (preferred arrangement set forth below) 3. Computer Readable Form (CRF) - Descriptive title of the invention b. Specification Sequence Listing on: - Cross Reference to Related Applications i. CD-ROM or CD-R (2 copies); or - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix Statements verifying identity of above copies Background of the Invention Brief Summary of the Invention
Brief Description of the Drawings (if filed) ACCOMPANYING APPLICATION PARTS - Detailed Description Assignment Papers (cover sheet & document(s)) - Claim(s) 37 CFR 3.73(b) Statement Power of - Abstract of the Disclosure 10. (when there is an assignee) Attorney English Translation Document (if applicable) Drawing(s) (35 U.S.C. 113) [Total Sheets 9 Copies of IDS Information Disclosure 5. Oath or Declaration [Total Pages | 2 Citations Statement (IDS)/PTO-1449 Newly executed (original or copy) Copy from a prior application (37 CFR 1.63 (d)) (for continuation/divisional with Box 18 completed) 13. Preliminary Amendment Return Receipt Postcard (MPEP 503) b. (Should be specifically itemized) Certified Copy of Priority Document(s) (if foreign priority is claimed) **DELETION OF INVENTOR(S)** 15 Signed statement attached deleting inventor(s) Nonpublication Request under 35 U.S.C. 122 named in the prior application, see 37 CFR 16. 1.63(d)(2) and 1.33(b). (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. Application Data Sheet. See 37 CFR 1.76 Other: 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) of prior application No.:_ Prior application Information: For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The Incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS Customer Number 26710 4 Correspondence address below Barry E. Sammons Name Quarles & Brady, LLP 411 East Wisconsin Avenue Address City Milwaukee State Zip Code 53202 WI USA Country Telephone 414-277-5705 414-271-3552 Fax Registration No. (Attorney/Agent) 25.608 Name (Print/Type) Sammons Signature Date Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450

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		First Named Inventor	Christopher J. Hanna				
Effective 10/01/2003. Patent fees are subject to annual revision. Applicant claims small entity status. See 37 CFR 1.27		Examiner Name					
		Art Unit					
TOTAL AMOUNT OF PAYMENT	(\$) 493.00	Attorney Docket No.	901120.90011				

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METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)							
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1002 340 2002 170 Design filing fee	1401	330	2401	165	Notice of Appeal			
1003 530 2003 265 Plant filing fee	1402	330	2402		Filing a brief in support	• • •		
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SUBTOTAL (1) (\$) 385.00		110	2452	55	Petition to revive - unav-	oidable		
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2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		,330	2501	665	Utility issue fee (or reiss	(or reissue)		
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**or number previously paid, if greater; For Reissues, see above		*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 0.00						
SUBMITTED BY (Complete (if applicable))								
Name (Print/Type) Raph E Sammons Registration No. 25 609 Telephone 414 277 5705								

Date Signature

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